

GRETCHEN WHITMER GOVERNOR

STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS MICHIGAN OFFICE OF ADMINISTRATIVE HEARINGS AND RULES SUZANNE SONNEBORN EXECUTIVE DIRECTOR

MARLON I. BROWN, DPA ACTING DIRECTOR

| | Petitioner(s) | | |
|----|--|--|----------|
| V | | MOAHR Docket No | |
| | Respondent(s) | | |
| | REQU | EST TO BE HEARD BY TELEPHONE | |
| 1. | A hearing is scheduled to | be conducted on | |
| 2. | I ask the Tribunal to allow me to participate in the hearing by telephone because: | | |
| | | | |
| | | Party/Representative (sign here) | |
| | | [Print/type name of person signing] | |
| | ify that on this date I se sentative. | erved a copy of this request on the opposing party | or their |
| | Date | (sign here) | |



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| | MICHIGAN TAX TRIBUNAL |
|---|---|
| Petitioner(s) | |
| V | |
| Respondent(s) | MOAHR Docket No |
| Petitioner's Telephone Number Form | |
| Respondent's Telephone Number Form | |
| Please provide the telephone number at whic representative will be available on the date ar conference, or hearing, as appropriate. | h you and your attorney or authorized nd time for your status conference, prehearing |
| If this information is not received by the Triburyour conference or hearing, you may be place | nal by the day prior to the day for the conducting of ed in default, as provided by TTR 231. |
| Petitioner's/Petitioner's Attorney or Authorized | d Representative (if applicable) telephone number: |
| Name: | |
| Phone:() | |
| Respondent's/Respondent's Attorney or Authnumber: | orized Representative (if applicable) telephone |
| Name: | |
| Phone:() | |